Under the Paperwork Reduction	n Act of 1995, no person are r	equired to res	U.S.	Patent and i	Approved for use of Trademark Office; of Information unless it	through 06/30/2 J.S. DEPARTM	PTO/SB/17 (10 010. OMB 0651-0 ENT OF COMMEI	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
			cation Nur	nber	10/749,532-Conf. #8878			
FEE TRANSMITTAL			Filing Date		December 30, 2003			
For FY 2008			First Named Inventor		Mineo Yamakawa			
			Examiner Name		T. D. Wessendorf			
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		1639			
TOTAL AMOUNT OF PAYMENT (\$) 810.00		Attorn	ey Docket	No.	21058/0206764-US0			
METHOD OF PAYMENT (chec	k all that apply)							
Check X Credit Card	Money Order	None	Other (please identi	ify):			
Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.								
For the above-identified de	osit account, the Direct	or is hereb	y authorize	ed to: (che	ck all that apply	0		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee								
x Charge any additional fee(s) or underpayments of x Credit any overpayments								
fee(s) under 37 CFR	1.16 and 1.17							
1. BASIC FILING, SEARCH, AND	EXAMINATION FEES							
		SEARCH	FEES	EXAMI	NATION FEE:	ŝ		
Annalis de la Principal de la	Small Entity		all Entity		Small Entity			
Application Type Fee Utility 310		e (\$) 10	255	Fee (\$) 210	Fee (\$) 105	Fees	Paid (\$)	
Design 210		00	50	130	65			
Plant 210		10	155	160	80			
Reissue 310		10	255	620	310		——I	
Provisional 210		0	0	020	0			
. EXCESS CLAIM FEES		•	Ü	Ü	Ü		Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						50 210	25 105	
Multiple dependent claims						370	185	
Total Claims Extra Claims	Fee (\$) Fe	Fee Paid (\$)			Multiple Dependent Claims			
17 · 20 = 0 x = 0.			_		e (\$) Fee Paid (\$)		,	
HP = highest number of total claims paid	or, if greater than 20					0.00	_	
Indep. Claims Extra Claims	Fee (\$) Fe	ee Paid (\$)					_ i	
10	x =	0.00						
HP = highest number of independent clair 3. APPLICATION SIZE FEE If the specification and drawings listings under 37 CFR 1.52(e)) sheets or fraction thereof. See	exceed 100 sheets of pay , the application size fee	due is \$20	50 (\$130 f)	
Total Sheets Extra She				tion there	of Fee (\$)	Fee	Paid (\$)	
- 100 =	/50 =		up to a who					
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00								
SUBMITTED BY	,				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
ignature /Martin Sulsky/		Registra	tion No.	45.403	Telephone	(202) 63	9-7514	
/ (Auditey/Agent)					Date October 30, 2007			
Name (Print/Type) Martin Sulsky					Date	October 3	0, 2007	